

# County of Los Angeles **CHIEF EXECUTIVE OFFICE**

Kenneth Hahn Hall of Administration 500 West Temple Street, Room 713, Los Angeles, California 90012 (213) 974-1101 http://ceo.lacounty.gov

May 23, 2014

Board of Supervisors GLORIA MOLINA First District

MARK RIDLEY-THOMAS Second District

ZEV YAROSLAVSKY Third District

DON KNARE Fourth District

MICHAEL D. ANTONOVICH

Fifth District

To:

Supervisor Don Knabe, Chairman

Supervisor Gloria Molina

Supervisor Mark Ridley-Thomas Supervisor Zev Yaroslavsky

Supervisor Michael D. Antonovich

From:

William T Fuijoka

Chief Executive Officer

PUBLIC SAFETY REALIGNMENT: FISCAL YEAR 2013-14 THIRD QUARTER REPORT ON BUDGET AND PROGRAM PERFORMANCE MEASURES (ITEM 94-B, **AGENDA OF OCTOBER 8, 2013)** 

On October 8, 2013, the Board of Supervisors directed the Chief Executive Officer to initiate quarterly budget and performance reports for the Public Safety Realignment Act (AB109).

The State's Fiscal Year 2013-14 Budget allocated \$338,130,000 to the County for AB109 staffing, programs, and services. As of April 15, 2014, the County has received \$243,549,000 or 72 percent of the budget allocation, which is maintained by the Auditor-Controller (A-C) in trust accounts specifically for the remittance of AB109 funds from the State.

To date, the A-C has received AB109 related claims of \$233,579,000. departments have been reimbursed \$148,958,000 for AB109 staffing, programs, and community-based services incurred during the first two fiscal quarters. Third quarter claims of \$77,129,000 are pending A-C review prior to disbursement from the The Sheriff's Department's claims have exceeded their quarterly reimbursement cap, imposed for cash-flow purposes, by approximately \$7,491,000.

The Chief Executive Office (CEO) has established AB109 claims protocol whereby any claims exceeding the quarterly cap will need to be absorbed by the department until the end of the fiscal year. At year end, any unreimbursed claims will be reconciled up to Each Supervisor May 23, 2014 Page 2

each department's annual AB109 budget allocation. Should a department's AB109 claims result in a fiscal year-end deficit, the CEO may recommend the Board utilize any unused allocations from other departments or tap into the AB109 Reserve to make the department whole; otherwise, the department will absorb those AB109 costs within its regular budget. County departments' claims are summarized in Attachment I.

In addition, the comprehensive directory of AB109 programs has been updated through March 31, 2014, by County departments to reflect their progress toward meeting their stated annual performance targets (Attachment II).

Should you have any questions, please have a member of your staff contact either Georgia Mattera, Public Safety, at (213) 893-2374 or David Turla, Public Safety, at (213) 974-1178.

WTF:GAM:SW DT:llm

# Attachments

c: Executive Office, Board of Supervisors
County Counsel
District Attorney
Sheriff
Alternate Public Defender
Auditor-Controller
Fire
Health Services
Mental Health
Public Defender
Public Health
Probation

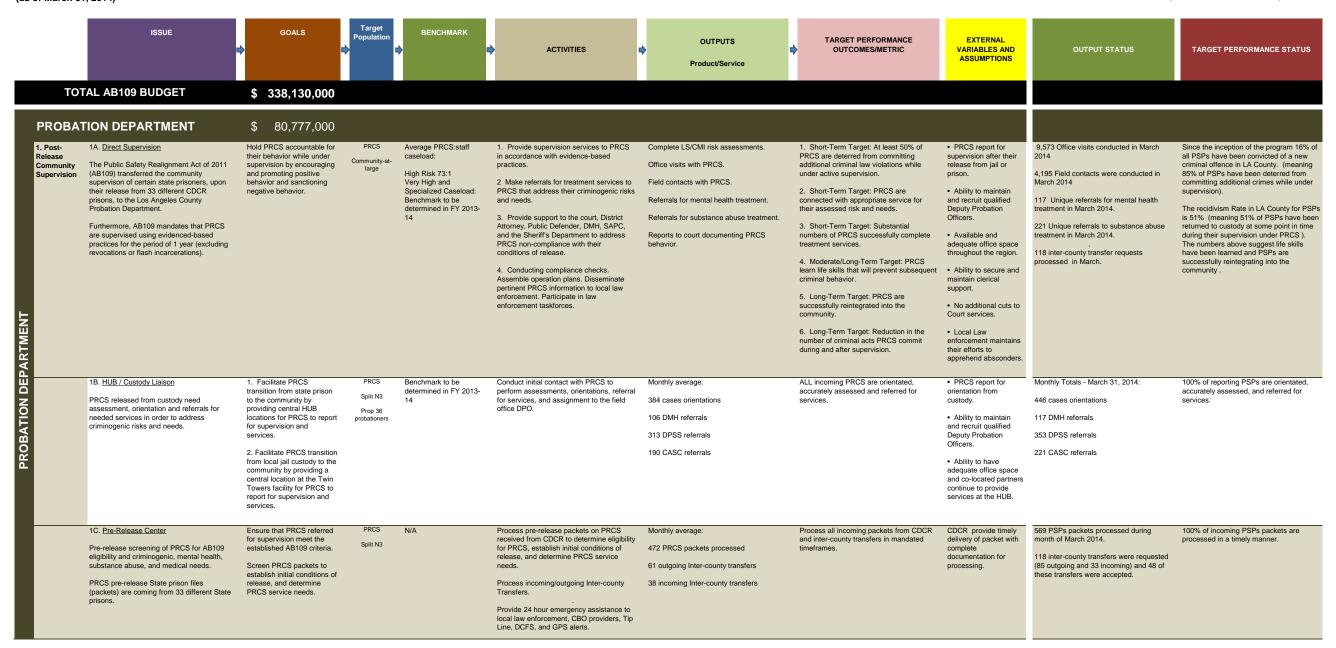
PS.B100386.AB109 Bdgt-Perf Rpt-3<sup>rd</sup> Qtr.bm.052314

FY2013-14 PUBLIC SAFETY REALIGNMENT (AB109)
Summary of Department Budget and Claims
(as of March 31, 2014)

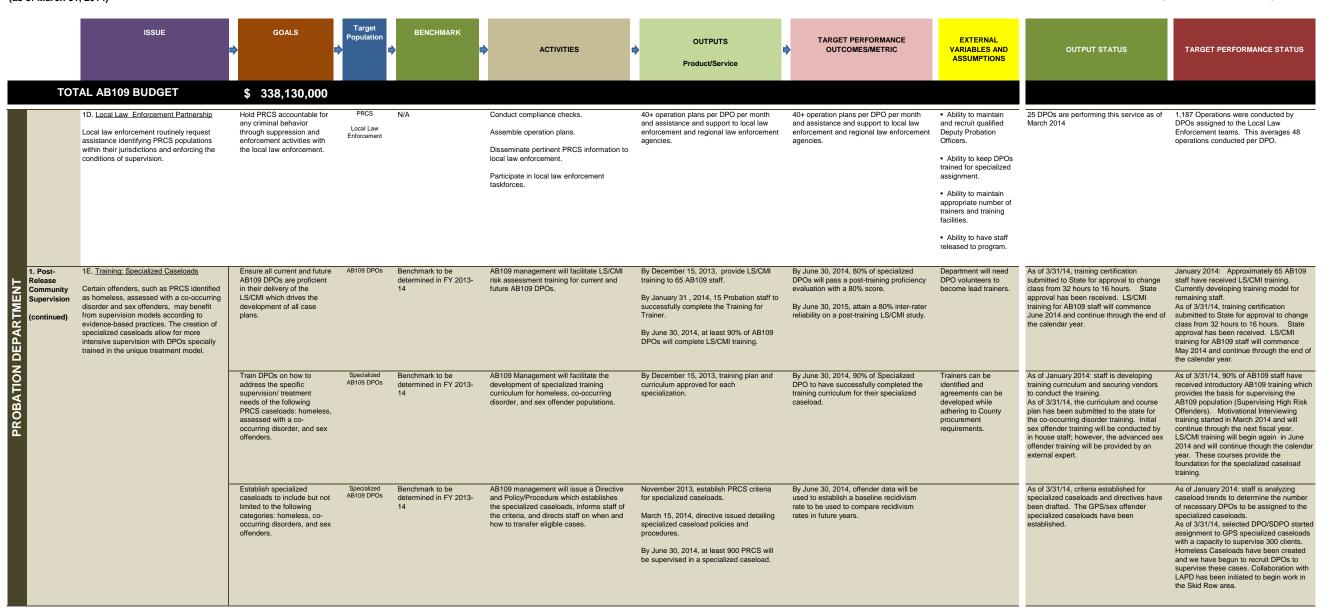
TOTAL AB109 BUDGET	Total Revocation Budget \$ 6,387,000 37	Conflict Panel	Alternate Public Defender	Public Defender	District Attorney	Total General Operations Budget	ISAB	coucc	Auditor-Controller	Department of Health Services	Department of Mental Health	Department of Public Health	Fire	Sheriff*	Probation	
	udget \$ 6	₩	€9	<del>69</del>	<b>↔</b> ധ		₩	₩	₩	€9	₩	€9	<del>\$</del>	\$185	\$ 80	
\$338,130,000	,387,000	54,000	1,013,000	2,290,000	3,030,000	\$331,743,000	635,000	190,000	253,000	15,255,000	28,005,000	12,399,000	8,727,000	\$185,502,000	80,777,000	Budget
1,264	37	0	6	ಪ	<del>1</del> 8	1,227	0	_	_	50	80	12	0	577	506	Staff
fo	<del>6</del>	↔	↔	₩	₩	€.	49	₩	G	€9	<del>69</del>	€	49	€,	€9	
\$233,578,567	\$ 3,570,751 \$ 1,098,755	1	366,966	1,221,022	1,982,763	\$230,007,816	439,587	59,881	55,209	6,136,573	23,246,395	6,565,061	238,104	\$136,910,959	\$ 56,356,047	CLAIM SUBMITTED
49	\$	↔	↔	↔	↔	<b>€</b>	₩	₩	€9	↔	<del>Ω</del>	₩	↔	<del>()</del>	<del>~</del>	REIN
\$ 70,759,620	1,098,755	ŧ	108,002	395,956	594,797	\$ 69,660,865	ı	28,963	•	2,142,573	5,713,277	1,462,104	118,494	43,140,000	17,055,454	1Q REIMBURSEMENT
€9	\$	↔	↔	↔	↔	\$ 7	₩.	↔	<del>69</del>	↔	€9	<del>⇔</del>	↔	<del>\$</del>	\$ 2	REIN
\$ 78,198,693	\$ 1,129,581	ı	108,002	410,592	610,987	\$ 77,069,112	•	30,918	23,181	1,796,451	8,996,456	2,505,667	61,196	43,140,000	20,515,243	2Q REIMBURSEMENT
↔	\$	₩	↔	↔	↔	\$ 7	₩	Ġ	↔	₩.	<del>⇔</del>	↔	↔	<del>⇔</del> 4	<b>↔</b>	REIM (F
\$ 77,129,294	\$ 1,342,415	ı	150,962	414,474	776,979	75,786,879	439,587	÷	32,028	2,197,549	8,536,662	2,597,290	58,414	43,140,000	18,785,349	3Q REIMBURSEMENT (PENDING)
€9	\$	\$	49	\$	↔	<b>⇔</b>	\$	↔	<del>()</del>	↔	↔	↔	€9	<del>()</del>	↔	REIN
148,958,314	2,228,336		216,004	806,548	1,205,784	\$ 146,729,978		59,881	23,181	3,939,024	14,709,733	3,967,771	179,690	86,280,000	37,570,698	TOTAL REIMBURSEMENTS (1Q + 2Q)
€9	€	€	↔	↔	↔	<b>⇔</b> ∞	<del>cs</del>	↔	↔	↔	↔	€9	↔	\$ 5	<b>⇔</b>	UNR
\$ 84,620,253	\$ 1,342,415	,	150,962	414,474	776,979	\$ 83,277,838	439,587	1	32,028	2,197,549	8,536,662	2,597,290	58,414	50,630,959	18,785,349	UNREIMBURSED/ PENDING (3Q) COSTS
1,026	28	0	(J)	<u></u>	15	998	0		0	20	71	9	0	577	320	STAFF

department until the end of the fiscal year, whereupon, any unreimbursed claims will be reconciled up to each department's annual AB109 budget allocation. Should a department's AB109 claims result in a fiscal year-end deficit, the CEO may recommend the Board utilize any remaining allocations from other departments or tap into the AB109 Reserve to make the department whole; otherwise, the department will absorb those AB109 costs within its regular Sheriff claims have exceeded their quarterly reimbursement cap by \$7,491,000. Claims exceeding the quarterly cap will need to be absorbed by the

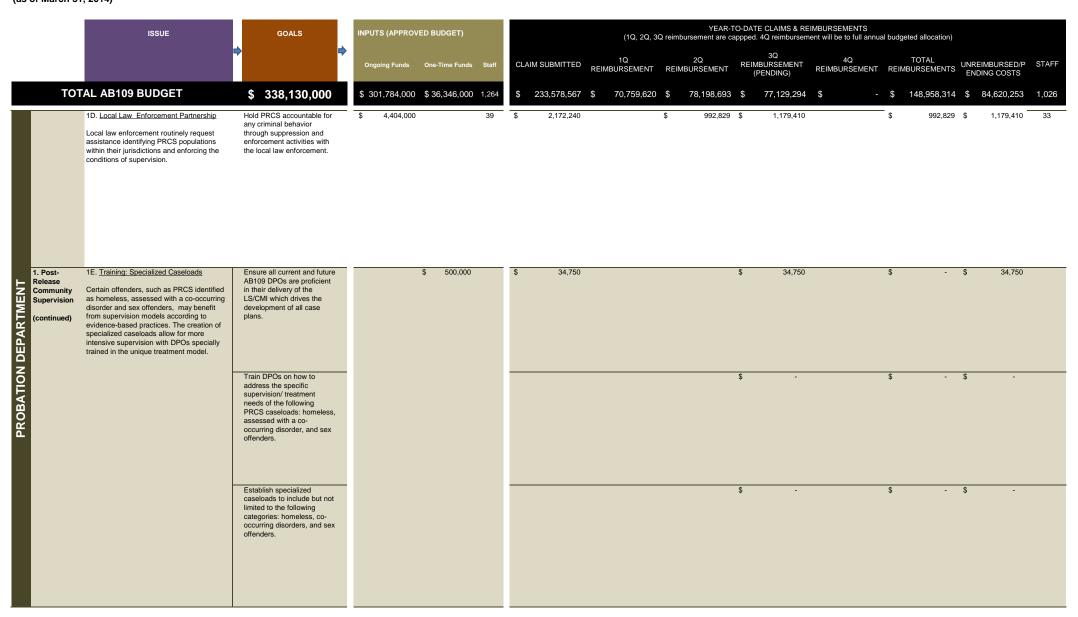
# ATTACHMENT II PERFORMANCE STATUS (as of March 31, 2014)



	ISSUE	GOALS	INPUT	S (APPR	OVED BUDG	GET)					(1Q, 2Q, 30	Q reimbu			CLAIMS & REI		al budge	eted allocation)			
		<b>→</b>	Ong	oing Funds	One-Tim	ne Funds	Staff	CL	AIM SUBMITTED	REIM	1Q IBURSEMENT	REIME	2Q BURSEMENT	REIME (P	3Q BURSEMENT ENDING)	4Q RSEMENT	REIM	TOTAL BURSEMENTS	UNRE ENI	EIMBURSED/P DING COSTS	STAF
TO1	TAL AB109 BUDGET	\$ 338,130,000	\$ 30	1,784,00	0 \$ 36,3	46,000	1,264	\$	233,578,567	\$	70,759,620	\$	78,198,693	\$	77,129,294	\$ -	\$	148,958,314	\$	84,620,253	1,02
PROBAT	TION DEPARTMENT	\$ 80,777,000	\$ 7	4,191,00	0 \$ 6,58	86,000	506	\$	56,356,047	\$	17,055,454	\$	20,515,243	\$	18,785,349	\$ -	\$	37,570,698	\$	18,785,349	320
1. Post- Release Community Supervision	1A. Direct Supervision  The Public Safety Realignment Act of 2011 (AB109) transferred the community supervision of certain state prisoners, upon their release from 33 different CDCR prisons, to the Los Angeles County Probation Department.  Furthermore, AB109 mandates that PRCS are supervised using evidenced-based practices for the period of 1 year (excluding revocations or flash incarcerations).	Hold PRCS accountable for their behavior while under supervision by encouraging and promoting positive behavior and sanctioning negative behavior.	\$	50,205,00	00		396	\$	39,874,903	\$	12,848,238	\$	13,964,380	\$	13,062,286		\$	26,812,618	\$	13,062,286	238
	HuB / Custody Liaison  PRCS released from custody need assessment, orientation and referrals for needed services in order to address criminogenic risks and needs.	Facilitate PRCS transition from state prison to the community by providing central HUB locations for PRCS to report for supervision and services.      Facilitate PRCS transition from local jail custody to the community by providing a central location at the Twin Towers facility for PRCS to report for supervision and services.	\$	4,030,00	00		38	\$	2,686,392	\$	1,000,510	\$	927,956	\$	757,926		\$	1,928,466	\$	757,926	24
	1C. <u>Pre-Release Center</u> Pre-release screening of PRCS for AB109 eligibility and criminogenic, mental health, substance abuse, and medical needs.  PRCS pre-release State prison files (packets) are coming from 33 different State prisons.	Ensure that PRCS referred for supervision meet the established AB109 criteria.  Screen PRCS packets to establish initial conditions of release, and determine PRCS service needs.	\$	3,552,00	0		33	\$	4,590,289	\$	1,538,155	\$	1,634,916	\$	1,417,218		\$	3,173,071	\$	1,417,218	28

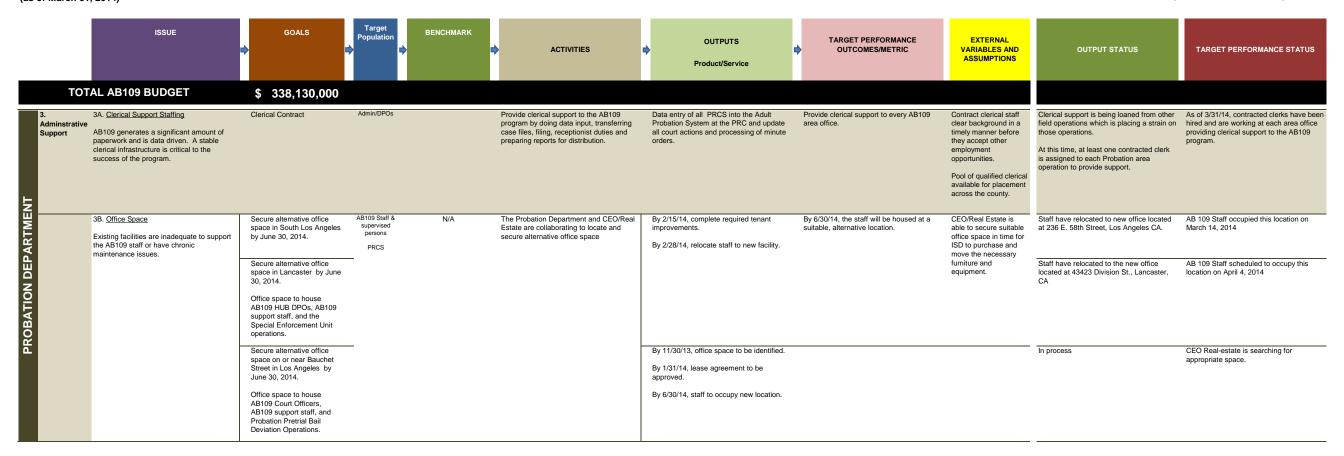


# COUNTY OF LOS ANGELES AB109 PUBLIC SAFETY REALIGNMENT PROGRAM DIRECTORY & PERFORMANCE MEASURES REPORT (as of March 31, 2014)



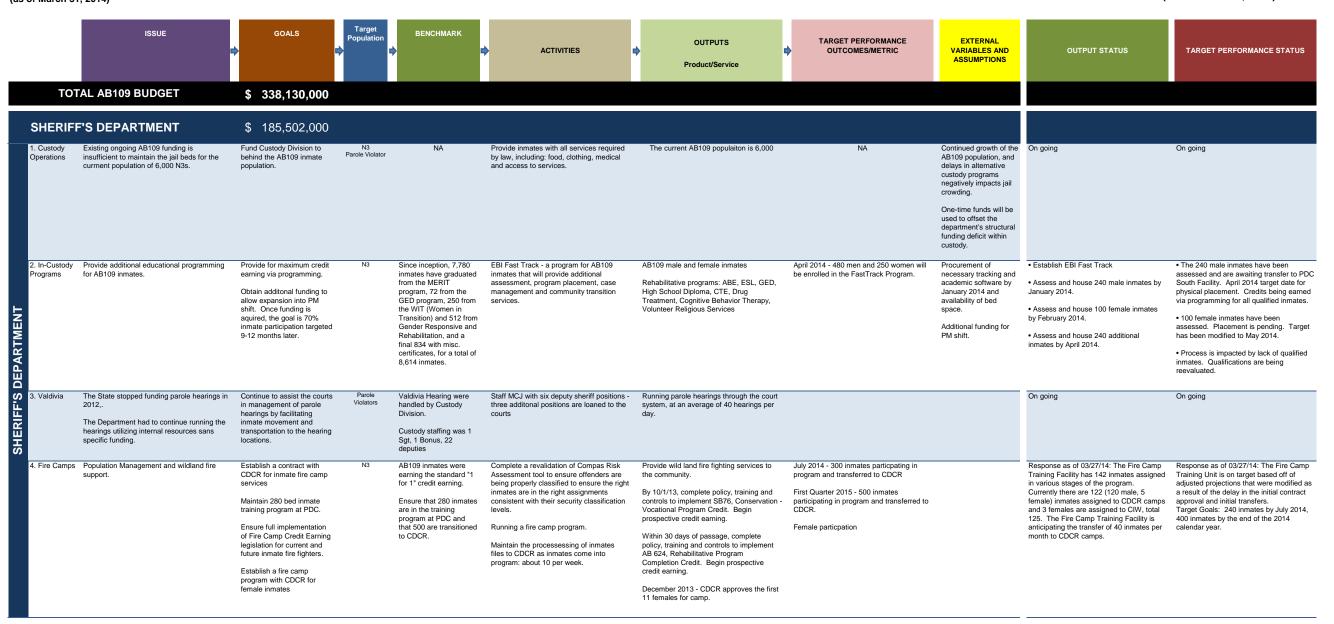
	ISSUE	GOALS	Target Population	BENCHMARK	ACTIVITIES	OUTPUTS Product/Service	TARGET PERFORMANCE OUTCOMES/METRIC	EXTERNAL VARIABLES AND ASSUMPTIONS	OUTPUT STATUS	TARGET PERFORMANCE STATUS
TC	TAL AB109 BUDGET	\$ 338,130,000								
2. CBO Services	Support Services Contract  A large number of PRCS are released from custody without housing or employment prospects.	Housing	PRCS	Benchmarks to be established during FY 2013-14.	Provide temporary housing for supervised persons.	8,400 housing referrals processed annually	PRCS homelessness will be reduced through the allocation of temporary housing space.	DPOs submit referrals to contractor for services.	As of March 31,2014 8,200 referrals have been processed by HR360.	95% of referrals are provided services within 3 days.
IENT		Case Management	_		Develop individualized case plans with PRCS that address clothing, entitlement benefits, and barriers to self-sufficiency so that PRCS can be transitioned to permanent housing.	A minimum of 8,200 cases to receive case management.	Reduce PRCS reliance on housing services by providing case management to support PRCS efforts to transition into permanent housing.  At least 50% of program participants transition to permanent housing within 180 days.	PRCS willing to participate in case management services and will be able to pay for permanent housing.  Contractor able to hire staff member to perform service.  Selected staff member able to pass background clearance.	As of March 2014, contractor has hired a total of 7 staff members to perform case management services.	The utilization of Auxiliary funds has assisted case managers to provide additional support to job acquisition and has a direct effect on PSPs ability to support themselves and transition into permanent housing.
DEPARTMENT		Transportation	_		Transport PRCS to housing facilities, treatment facilities, and court appointments as necessary.	Transportation services provided to 100 PRCS monthly.	PRCS receiving housing services are provided with transportation to other support and treatment services which are needed for successful reentry.	Contractor continues to satisfy contract obligations.	PSPs are currently provided transportation services on an as-needed basis.	N/A
ROBATION D		Employment Services	_		Conduct assessments and provide job readiness workshops, job placement and employment retention services to PRCS.	800 employment service referrals processed annually.	Increase job readiness, job placement and job retention with an aim toward employment that may lead to successful career paths.	Employers are willing to hire PRCS. Contractor continues to satisfy contract obligations.	Providing services to approximately 500 PSPs per month.	Due to staffing issues, quality control is limited to verification of invoices at this time.
PROB	2B. Close Support Service Gaps  The County provides transportation, housing, and employment services to the PRCS population through a contract with HealthRight 360. Probation has identified and is addressing service gaps. The one-time funding would be used to cover service expansion needs.	Reduce sex offender homelessness.	PRCS (Sex Offender)	Benchmarks to be established during FY 2013-14.	Modify contract with HR360 to provide suitable housing for the respective PRCS populations.	September 2013, contract modification approved.  December 1, 2013, Directive to staff regarding revised policy/procedures for sex offender housing.  June 30, 2014, 30 housing units made available for sex offenders.	Sex offender homelessness will be reduced by providing a minimum of 30 beds.  Increased supervision of sex offenders.	Assumption that PSPs is willing to accept the accommodations that will be provided to them.  Assumption that contractor will be able to fulfill contract requirements and	March 2014: in the process of locating suitable housing.	As of 3/31/14, suitable facility has not been located. Management is working with the vendor to find suitable alternatives.
		Provide medically fragile housing, including board & care and nursing facilities.	PRCS (Medically Fragile)		Mgmt. staff to issue new/revised policies and procedures to staff to inform staff of procedure changes; formalize the process; and efficiently provide appropriate housing.	October 2013, contract modification approved.  December 1, 2013, Directive to staff regarding revised policy/procedures for medically fragile.  June 30, 2014, capacity to provide housing for medically fragile PRCS.	Overall costs to house medically fragile PRCS will be reduced.	locate suitable housing.  Assumption that community will accept housing plan.	January 2014: A Skilled Nursing Facility has been located. A PSPs has recently been placed in the facility.	Successful reduction in costs to house medically fragile PSPs.
		Add case management to reduce PRCS time receiving housing services and employment services and improve PRCS outcomes.	PRCS		Modify contract with HR360 to provide case management services for all PRCS receiving services.  Management to ensure that DPOs receive case management reports.	October 2013, contract modification approved.  December 1, 2013, case management reports sent by HR360 to DPOs on a monthly basis.	Improved outcomes for PRCS that receive HR360 services. Increased PRCS accountability. Increased PRCS engagement with treatment services.		October 2013, contract modification approved.  December 1, 2013, case management reports sent by HR360 to DPOs on a monthly basis.	As of 3/31/14, contractor provides case management services to PSPs receiving housing/employment services. Probation department staff receive regular case management and progress reports from case managers.

	ISSUE	GOALS	INPUTS (APPROV	/ED BUDGET)					(1Q, 2Q, 30	Q reimbu	YEAR-T rsement are ca	O-DATE appped. 4	CLAIMS & RE Q reimbursen	IMBURSEMENTS nent will be to full annua	ıl budge	eted allocation)			
		<b>*</b>	Ongoing Funds	One-Time Funds	Staff	CLAIM	SUBMITTED	REIM	1Q IBURSEMENT	REIMB	2Q SURSEMENT	REIMBI (PE	3Q URSEMENT ENDING)	4Q REIMBURSEMENT	REIM	TOTAL BURSEMENTS	UNREIN ENDIN	MBURSED/P	STAFF
Ī	OTAL AB109 BUDGET	\$ 338,130,000	\$ 301,784,000	\$ 36,346,000	1,264	\$ 2	233,578,567	\$	70,759,620	\$	78,198,693	\$	77,129,294	\$ -	\$	148,958,314	\$ 8	4,620,253	1,026
2. CBO Services	Support Services Contract     A large number of PRCS are released from custody without housing or employment prospects.	Housing	\$ 12,000,000			\$	5,804,734	\$	1,367,455	\$	2,485,685	\$	1,951,594		\$	3,853,140	\$	1,951,594	
		Case Management																	
ARTMENT		Transportation																	
PROBATION DEPARTMENT		Employment Services																	
PROB	2B. Close Support Service Gaps  The County provides transportation, housing, and employment services to the PRCS population through a contract with HealthRight 360. Probation has identified and is addressing service gaps. The one-time funding would be used to cover service expansion needs.	Reduce sex offender homelessness.		\$ 1,200,000								\$	-		\$		\$	-	
		Provide medically fragile housing, including board & care and nursing facilities.																	
		Add case management to reduce PRCS time receiving housing services and employment services and improve PRCS outcomes.																	

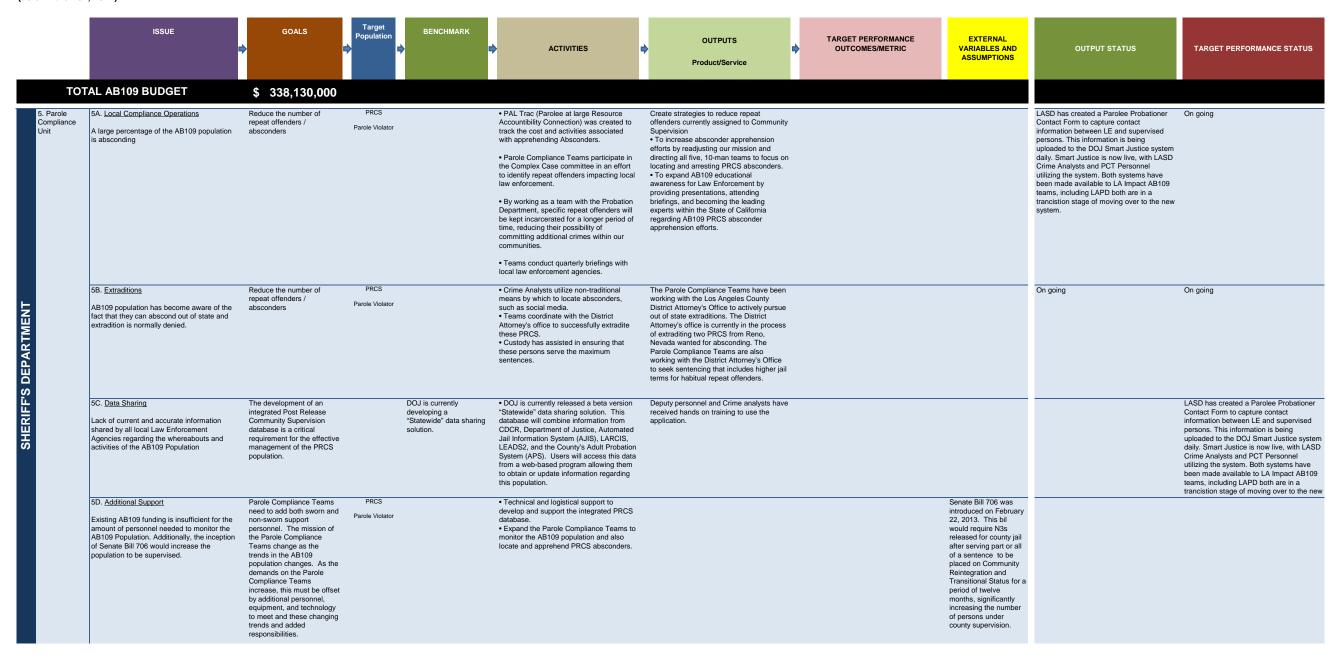


# COUNTY OF LOS ANGELES AB109 PUBLIC SAFETY REALIGNMENT PROGRAM DIRECTORY & PERFORMANCE MEASURES REPORT (as of March 31, 2014)

	ISSUE	GOALS	INPUTS (APPRO)	/ED BUDGET)			(1Q,	2Q, 3Q rei		O-DATE CLAIMS & REappped. 4Q reimbursen		ual budgeted allocation		
		•	Ongoing Funds	One-Time Funds	s Staff	CLAIM SUBMITTED	1Q REIMBURSEM	ENT RE	2Q EIMBURSEMENT	3Q REIMBURSEMENT (PENDING)	4Q REIMBURSEMENT	TOTAL REIMBURSEMENT	S UNREIMBURSED/P ENDING COSTS	STAFF
TO	TAL AB109 BUDGET	\$ 338,130,000	\$ 301,784,000	\$ 36,346,000	) 1,264	\$ 233,578,567	\$ 70,759	,620 \$	78,198,693	\$ 77,129,294	\$	\$ 148,958,31	4 \$ 84,620,253	1,026
3. Adminstrative Support	3A. Clerical Support Staffing  AB109 generates a significant amount of paperwork and is data driven. A stable clerical infrastructure is critical to the success of the program.	Clerical Contract		\$ 1,871,00	0	\$ 1,192,738	\$ 301	,096 \$	509,477	\$ 382,166		\$ 810,57	3 \$ 382,166	
ARIMENT TABLES	3B. Office Space  Existing facilities are inadequate to support the AB109 staff or have chronic maintenance issues.	Secure alternative office space in South Los Angeles by June 30, 2014.		\$ 755,000	)							\$ -	\$ -	
PROBATION DEP		Secure alternative office space in Lancaster by June 30, 2014.  Office space to house AB109 HUB DPOs, AB109 support staff, and the Special Enforcement Unit operations.		\$ 760,000								\$ -	\$ -	
		Secure alternative office space on or near Bauchet Street in Los Angeles by June 30, 2014.  Office space to house AB109 Court Officers, AB109 support staff, and Probation Pretrial Bail Deviation Operations.		\$ 1,500,000	0							\$ -	\$ -	



	ISSUE	GOALS	INPU	TS (APPROV	/ED BUDGET)					(1Q, 2Q, 3C	2 reimbu	YEAR-TO ursement are cap	CLAIMS & REI			al budget	ed allocation)			
		•	Onç	going Funds	One-Time Fund	ds Staff	CL	AIM SUBMITTED	REIM	1Q MBURSEMENT	REIME	2Q BURSEMENT	3Q BURSEMENT ENDING)	4Q REIMBURSE	MENT		TOTAL SURSEMENTS		REIMBURSED/P IDING COSTS	STAFF
TO	TAL AB109 BUDGET	\$ 338,130,000	\$ 30	01,784,000	\$ 36,346,00	00 1,264	\$	233,578,567	\$	70,759,620	\$	78,198,693	\$ 77,129,294	\$	-	\$	148,958,31	4 \$	84,620,253	1,026
SHERIF	F'S DEPARTMENT	\$ 185,502,000	\$ 17	72,123,000	\$ 13,379,00	00 577	\$	136,910,959	\$	43,140,000	\$	43,140,000	\$ 43,140,000	\$		\$	86,280,00	0 \$	50,630,959	577
1. Custody Operations	Existing ongoing AB109 funding is insufficient to maintain the jail beds for the currnent population of 6,000 N3s.	Fund Custody Division to behind the AB109 inmate population.	\$	149,428,450	\$ 13,379,00	00 437	\$	126,379,388	\$	40,262,951	\$	39,745,032	\$ 38,880,446			\$	80,007,98	3 \$	46,371,405	437
2. In-Custody Programs  LNEWLY Programs  3. Valdivia	Provide additional educational programming for AB109 inmates.	Provide for maximum credit earning via programming.  Obtain additonal funding to allow expansion into PM shift. Once funding is aquired, the goal is 70% inmate participation targeted 9-12 months later.	\$	7,002,550		61	\$	3,718,127	\$	1,076,208	\$	1,102,894	\$ 1,539,025			\$	2,179,10:	2 \$	1,539,025	61
3. Valdivia	The State stopped funding parole hearings in 2012,.  The Department had to continue running the hearings utilizing internal resources sans specific funding.	Continue to assist the courts in management of parole hearings by facilitating inmate movement and transportation to the hearing locations.	\$	1,554,000		9	\$	983,177	\$	-	\$	581,938	\$ 401,239			\$	581,93	3 \$	401,239	9
4. Fire Camps	Population Management and wildland fire support.	Establish a contract with CDCR for inmate fire camp services  Maintain 280 bed inmate training program at PDC.  Ensure full implementation of Fire Camp Credit Earning legislation for current and future inmate fire fighters.  Establish a fire camp program with CDCR for female inmates	\$	3,324,000		1	\$	-	\$	-						\$	-	\$	-	1



233,578,567 \$

5,830,267 \$

YEAR-TO-DATE CLAIMS & REIMBURSEMENTS

77,129,294 \$

2,319,290

4Q TOTAL UNREIMBURSED/P STAFF
REIMBURSEMENT REIMBURSEMENTS ENDING COSTS

- \$ 148,958,314 \$ 84,620,253 1,026

2,319,290

3,510,977 \$

(1Q, 2Q, 3Q reimbursement are cappped. 4Q reimbursement will be to full annual budgeted allocation)

3Q REIMBURSEMENT

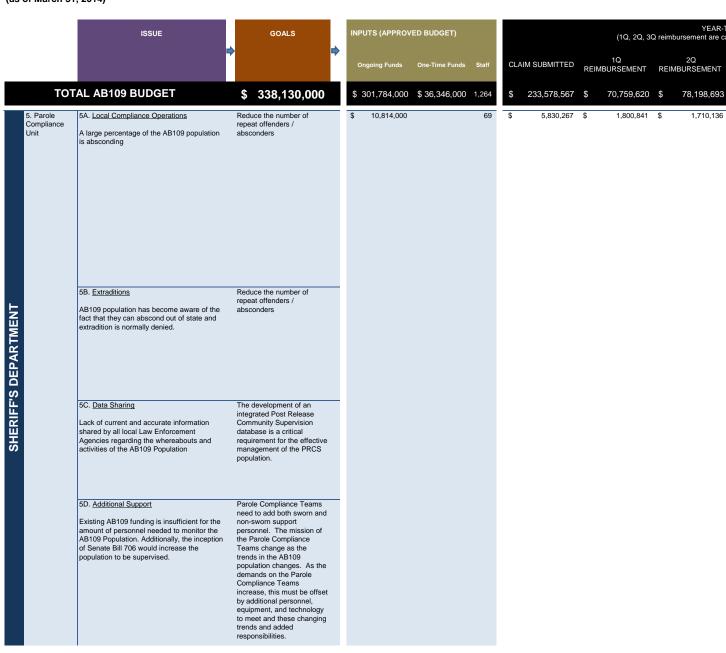
(PENDING)

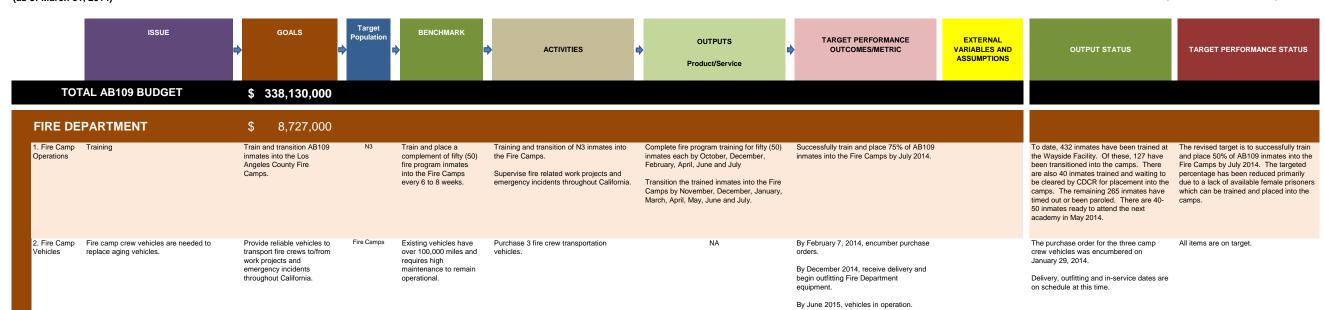
70,759,620 \$ 78,198,693 \$

1,710,136 \$

1,800,841 \$

12 of 36





# COUNTY OF LOS ANGELES AB109 PUBLIC SAFETY REALIGNMENT PROGRAM DIRECTORY & PERFORMANCE MEASURES REPORT (as of March 31, 2014)

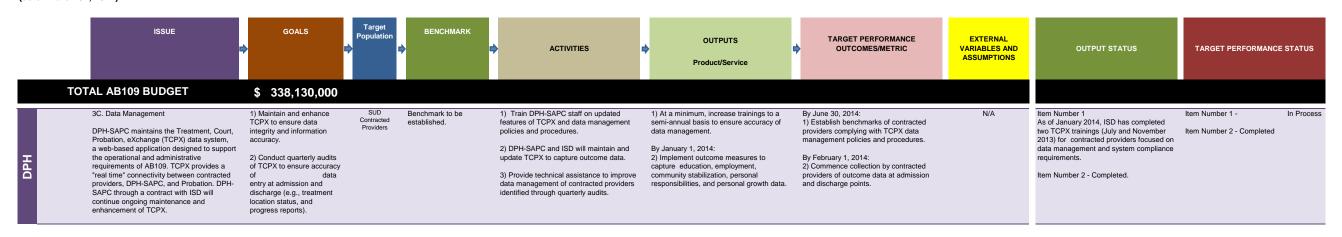
	ISSUE	GOALS	INPU	JTS (APPROV	'ED BUI	DGET)					(1Q, 2Q, 3Q	) reim		TE CLAIMS & REII d. 4Q reimburseme			l bud	lgeted allocation)		
	4	•	On	ngoing Funds	One-T	ime Funds	Staff	CLA	IM SUBMITTED	REI	1Q IMBURSEMENT	REI	2Q MBURSEMENT	3Q IMBURSEMENT (PENDING)	REI	4Q MBURSEMENT	RE	TOTAL IMBURSEMENTS	EIMBURSED/P DING COSTS	STAFF
TOTAL A	AB109 BUDGET	\$ 338,130,000	\$ 3	301,784,000	\$ 36,	,346,000	1,264	\$	233,578,567	\$	70,759,620	\$	78,198,693	\$ 77,129,294	\$	-	\$	148,958,314	\$ 84,620,253	1,026
FIRE DEPAR	TMENT	\$ 8,727,000	\$	8,161,000	\$	566,000	0	\$	238,104	\$	118,494	\$	61,196	\$ 58,414	\$	-	\$	179,690	\$ 58,414	0
Fire Camp Traini Operations	ng	Train and transition AB109 inmates into the Los Angeles County Fire Camps.	\$	8,161,000			0	\$	238,104	\$	118,494	\$	61,196	\$ 58,414			\$	179,690	\$ 58,414	0
	amp crew vehicles are needed to se aging vehicles.	Provide reliable vehicles to transport fire crews to/from work projects and emergency incidents throughout California.			\$	566,000		\$	-	\$	-						\$		\$	0

	ISSUE	GOALS	Target Population	BENCHMARK	ACTIVITIES	OUTPUTS Product/Service	TARGET PERFORMANCE OUTCOMES/METRIC	EXTERNAL VARIABLES AND ASSUMPTIONS	OUTPUT STATUS	TARGET PERFORMANCE STATUS
	TOTAL AB109 BUDGET	\$ 338,130,000								
F	DEPARTMENT OF PUBLIC HEALTH	\$ 12,399,000								
В	Community  1A. Treatment Provider Network Services ased ervices  AB109 mandated an array of comprehensive services be available to AB109 clients.  Provide technical support to treatment providers.	Provide treatment services:  Substance Use Disorder (SUD) services for residential  Outpatient counseling  Alcohol and Drug-Free Living Centers (ADFLC)  Medication Assisted Treatment (MAT) services	PRCS N3	12 Contracted Treatment Providers	Treatment services are provided to AB109 clients.	Ongoing: Ensure treatment provider network continues providing contracted treatment services.	Ongoing: Ensure treatment provider network continues providing contracted treatment services.		In Process	From July 1, 2013 through March 31, 2014: 1,672 new admissions to treatment services; with 2,226 total (new and existing) serviced during the same time period.
PUBLIC HEALTH		Add treatment slots to the current treatment network.  Implement technical assistance and training utilizing Evidence Based Practices (EBPs) to contracted SUD treatment provider network focusing on treatment engagement and retention.	PRCS N3 PRCS N3		Amend existing SUD contracts.  Maintain bi-monthly meetings with contracted treatment providers to monitor improvement and address challenges of SUD system of care. To enhance engagement and retention, DPH-SAPC will provide trainings focused on the Treatment, Court, Probation, eXchange (TCPX) data system and EBPs to contracted treatment providers.	By April 1, 2014: Add an additional 78 treatment slots to the current treatment provider network.  By March 1, 2014: Commence bi-monthly trainings of contracted treatment providers focusing on engagement and retention.	Ongoing: Ensure treatment provider network continues providing contracted treatment services.		Request to amend existing AB 109 and treatment provider contracts submitted April 7, 2014; pending contract execution.  As of March 31, 2014, three trainings to enhance engagement and retention within the established provider network were offered: a) Treatment for Drug Offenders – Does it Work? How to Make it Work?; b) How being Trauma-Informed Improves Criminal Justice Responses; and c) Recovery Coaching - The Basics	In Process
DEPARTMENT OF PUBLIC HEALTH	1B. Expand Treatment Provider Network and Services  Of the total 3,255 clients who received SUD treatment services since AB109 implementation to June 30, 2013, approximately 38% received services outside the established AB109 treatment provider network.  Additionally, the treatment services currently provided needs to be expanded to meet client needs.	Expand the AB109 treatment provider network.  Reduce the number of clients accessing services outside of the AB109 treatment provider network.  Enhance the types of treatment services available.	PRCS N3  PRCS N3	Current SUD Contracted Treatment Providers: 12  38% of clients accessed services outside the established AB109 treatment provider network.  DPH-SAPC currently offers the following treatment service categories:  • Substance Use Disorder (SUD) services for residential  • Outpatient counseling • Alcohol and Drug-Free Living Centers (ADFLC)  • Medication Assisted Treatment (MAT) services	Obtain Board of Supervisors approval for the following:  1) Enter into SUD master agreements with qualified treatment providers eligible to apply for specific SUD master agreement work order contracts; and  2) Execute master agreement work orders.	By March 1, 2014:  1) Expand the current AB109 SUD treatment provider network.  2) Enhance the treatment service category options to add the following:  • Intensive outpatient counseling  • Residential medical detoxification services  • Narcotic Treatment Program services.	By March 1, 2014: Increase the number of treatment providers to at least 18.  By June 30, 2014: Decrease the number of AB109 clients accessing services outside the established AB 109 treatment provider network by 5-10% during the first three months of implementation from April 1, 2014 to June 30, 2014.  By June 30, 2014: The following treatment services will be available: residential medical detoxification services, intensive outpatient counseling services, and narcotics treatment program services.	Contracts funding will be subject to the one- time funds available each year; Pending Board Approval	Expansion of current treatment network and enhancement of treatment service categories are pending release of the AB 109 Work Order. Residential medical detoxification services scheduled to commence on April 1, 2014.	Expansion of current treatment network and enhancement of treatment service categories pending release of the AB 109 Work Order.

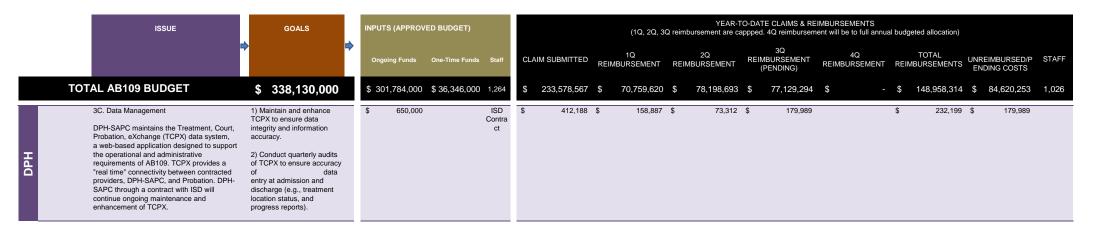
ISSUE	GOALS	INPUTS (APPROVED BUDGET)			(1Q, 2Q	, 3Q reimb				IMBURSEMENTS ent will be to full a	nual bud	dgeted allocation)			
	<b>+</b>	Ongoing Funds One-Time Funds St	iff CLAIM S	UBMITTED F	1Q REIMBURSEMEN	T REIN	2Q MBURSEMENT	REIME (P	3Q BURSEMENT PENDING)	4Q REIMBURSEME	NT RE	TOTAL IMBURSEMENTS	UNREIMBU ENDING C	RSED/P OSTS	STAF
TOTAL AB109 BUDGET	\$ 338,130,000	\$ 301,784,000 \$ 36,346,000 1,2	\$ 23°	3,578,567 \$	70,759,62	20 \$	78,198,693	\$	77,129,294	\$	- \$	148,958,314	\$ 84,62	20,253	1,02
DEPARTMENT OF PUBLIC HEALTH	\$ 12,399,000	\$ 8,903,000 \$ 3,496,000 1	\$	6,565,061 \$	1,462,10	04 \$	2,505,667	\$	2,597,290	\$	- \$	3,967,771	\$ 2,59	97,290	9
1. Community Based Services  AB109 mandated an array of comprehensive services be available to AB109 clients.  Provide technical support to treatment providers.	Provide treatment services:  • Substance Use Disorder (SUD) services for residential  • Outpatient counseling  • Alcohol and Drug-Free Living Centers (ADFLC)  • Medication Assisted Treatment (MAT) services  Add treatment slots to the current treatment network.  Implement technical assistance and training utilizing Evidence Based Practices (EBPs) to contracted SUD treatment provider network focusing on treatment engagement and retention.	6,128,000	\$ 3	3,602,112	957,18	86 \$	1,163,964	\$	1,480,963		\$	2,121,150	\$ 1,48	0,963	
1B. Expand Treatment Provider Network and Services  Of the total 3,255 clients who received SUD treatment services since AB109 implementation to June 30, 2013, approximately 38% received services outside the established AB109 treatment provider network.  Additionally, the treatment services currently provided needs to be expanded to meet client needs.	Expand the AB109 treatment provider network.  Reduce the number of clients accessing services outside of the AB109 treatment provider network.  Enhance the types of treatment services available.	\$ 3,096,000	\$	1,325,083 \$	•	\$	831,042	\$	494,041		\$	831,042	\$ 4	94,041	

	ISSUE	GOALS	Target Population	BENCHMARK	ACTIVITIES	OUTPUTS Product/Service	TARGET PERFORMANCE OUTCOMES/METRIC	EXTERNAL VARIABLES AND ASSUMPTIONS	OUTPUT STATUS	TARGET PERFORMANCE STATUS
TC	OTAL AB109 BUDGET	\$ 338,130,000								
	CASCs conduct the assessment to determine the severity of the client's SUD. A positive assessment results in a referral to a contracted treatment provider.	Provide technical assistance and coordinate training sessions utilizing EBPs focusing on client engagement, retention, and coordination of referrals.      Expand CASC contracts to ensure access to assessment, treatment, and other specialty services.      Increase show rate at treatment from CASC.	PRCS N3	8 Contracted CASC Providers FY 2012-13: 63% treatment admissions	1) Coordinate bi-monthly meetings with CASC to discuss emerging AB109 issues and establish recommendations that improve the assessment process and show rate at treatment from CASC.  2) Conduct focus groups with CASC staff and treatment providers to enhance the CASC assessment pathway to treatment.  3) Amend existing CASC contracts to hire additional staff to assist with related services including, but not limited to, TCPX data entry, follow up calls to clients, maintain open communication between probation and the clients, attend meetings, and trainings.	By March 1, 2014:  1) Commence bi-monthly trainings for contracted CASC providers focusing on client engagement and retention, emerging SUD regulations, and other topics related to working with the criminal justice population.  By April 1, 2014: 2) Contract amendment will facilitate five additional full-time equivalent CASC hires.	By December 31, 2014: Increase client presentation to treatment by 5%.		Training - In Process  As of March 2014, staff analyzed SUD assessment service trends and recommended additional funding adjustments of existing contracted providers based on current utilization rates. Request to amend existing AB 109 CASC contracts submitted April 7, 2014; pending contract execution.	From July 1, 2013 through March 31, 2014: 3,713 AB109 assessments have been completed by CASC.
2. SUD Pilot with Sheriff CBAC	In-custody Pilot Program  The Los Angeles Sheriff's Department (LASD) has identified a growing need for SUD treatment services amongst the incarcerated population.	Provide in-custody SUD assessment and referral services to the N3 population through the colocation of CASC staff at the jail's Community Re-entry and Resource Center (CRRC).	N3	Benchmark to be established.	I) Identify contracted CASC provider to colocate at CRRC.  2) Establish Memoradum of Agreement (MOA) partnership between DPH-SAPC and LASD for CRRC co-location.	By February 1, 2014: Execute CRRC MOA with LASD.  By February 15, 2014: Train and provide technical assistance to CASC on requirements of CRRC colocation.  By March 1, 2014: Execute contract with selected CASC.	By June 30, 2014: Sixty percent (60%) of inmates assessed by CASC will be properly linked to needed SUD treatment services in the community upon release.	Contingent on execution of MOA between DPH-SAPC and LASD, and opening of CRRC.	In Process: MOA submitted to LASD, pending approval. As of March 31, 2014, CASC attended the Treamtnet for Drug Offenders - Does it Work? How to Make it work, aimed at enhancing engagement and retention into treamtent services.  Request to amend existing AB 109 CASC contracts submitted April 7, 2014; pending contract execution.	In Process: DPH-SAPC has received approval from County Counsel and MOA has been given to LASD to sign. CRRC colocation will commence on April 28, 2014.
3. Administrati Oversight	3A. Contract Monitoring  Ive  DPH-SAPC staff provides ongoing programmatic, contractual, fiscal, and administrative oversight of Community Assessment Services Center (CASC) and SUD treatment programs.	Maintain compliance with AB109 contract monitoring of SUD treatment programs and CASC (contracted providers).  2) Ensure dedicated AB109 funding is fully utilized.	SUD Contracted Providers	Fiscal Year (FY) 2012- 13:  1) Eighty-four percent (84%) of contracted providers were monitored for contract and policy compliance.  2) One hundred percent (100%) of AB109 funding utilized for AB109 operations.	1) Provide technical assistance to contracted providers on programmatic and contractual requirements for AB109. 2) Maintain monitoring of contracted providers to ensure compliance of policies and procedures.  3) Review the utilization rates of all contracted providers on a regular basis to ensure the appropriate and effective use of AB109 funding.  4) Maintain bi-monthly meetings with the Probation Department, Department of Mental Health, and the Internal Services Department (ISD) for network discussions on overall countywide AB109 system of care, including discussions and recommendations on system	By March 31, 2014:  1) Ensure AB109 contracted providers knowledge of programmatic, contractual, quality, and administrative policies.  By December 31, 2014:  2) DPH-SAPC to recommend funding adjustments of existing contracted providers based on current utilization rates.	By June 30, 2014:  1) One hundred percent (100%) of SUD treatment programs and CASC are monitored for contract and policy compliance.  2) One hundred (100%) of AB109 contracted SUD funding fully utilized.	N/A	Item Number 1 - In Process  Item Number 2 - As of January 2014, staff analyzed SUD treatment service trends and recommended additional funding adjustments of existing contracted providers based on current utilization rates.	Item Number 1 - 55 percent contracted provider network monitored and on track to meet the 100% benchmark.  Item Number 2 - In Process
	3B. Criminogenic Training Pilot  CASC and the treatment provider network have reported particular challenges in motivating AB109 clients to engage in SUD treatment services. Overall, in-network treatment completion is 38%.	Assessment and referral process of the AB109 population to treatment;      Implementation of process improvement model and training of the AB109 treatment provider network.	CASC Assessors SUD Contracted Providers	FY 2012-13: 63% admissions 38% completions	Inplement a Pilot Project for CASC by selecting a new assessment pathway that improves case management and accounts for criminogenic needs.  2) Train providers in the NIATx Process Improvement Model to increase treatment engagement and retention.	By March 1, 2014: Assessors make more appropriate treatment referrals.  By December 31, 2013: Commence training for process improvement to increase treatment engagement and retention.	By June 30, 2014: Increase in-network treatment admissions to 68% Increase in-network treatment completion to 43%	Training from Pilot Project cannot commence without approval from Department of Public Health - Institutional Review Board (DPH- IRB) and University of California, Los Angeles - Instituational Review Board (UCLA-IRB).	Item Number 1 - Received DPH-IRB approval and pending UCLA-IRB approval. In addition, DPH-SAPC and UCLA are preparing to conduct focus group interviews with CASC and Treatment Provider Network.  Item Number 2 - In Process; Providers attended three trainings to help increase engagement and retention: a) Treatment for Drug Offenders – Does it Work? How to Make it Work?; b) How being Trauma-Informed Improves Criminal Justice Responses; and c) Recovery Coaching -	In Process: Due to delay in IRB approval target performance dates extended to December 31, 2014.

	ISSUE	GOALS	INPUTS (APPROV	ED BUDGET)			(1Q, 2Q, 3	YEAR-1 Q reimbursement are ca	TO-DATE CLAIMS & RI appped. 4Q reimburser		al budgeted allocation)		
		•	Ongoing Funds	One-Time Funds	Staff	CLAIM SUBMITTED	1Q REIMBURSEMENT	2Q REIMBURSEMENT	3Q REIMBURSEMENT (PENDING)	4Q REIMBURSEMENT	TOTAL REIMBURSEMENTS	UNREIMBURSED/P ENDING COSTS	STAF
тот	AL AB109 BUDGET	\$ 338,130,000	\$ 301,784,000	\$ 36,346,000	1,264	\$ 233,578,567	\$ 70,759,620	\$ 78,198,693	\$ 77,129,294	\$ -	\$ 148,958,314	\$ 84,620,253	1,02
	1C. Community Assessment Services Center (CASC)  CASCs conduct the assessment to determine the severity of the client's SUD. A positive assessment results in a referral to a contracted treatment provider.	1) Provide technical assistance and coordinate training sessions utilizing EBPs focusing on client engagement, retention, and coordination of referrals.  2) Expand CASC contracts to ensure access to assessment, treatment, and other specialty services.  3) Increase show rate at treatment from CASC.	1,120,000			\$ 774,059	\$ 206,411	\$ 289,564	\$ 278,084		\$ 495,975	\$ 278,084	
2. SUD Pilot	In-custody Pilot Program	Provide in-custody SUD		\$ 200,000		\$ -	\$ -		\$ -		\$ -	\$ -	
with Sheriff CBAC	The Los Angeles Sheriff's Department (LASD) has identified a growing need for SUD treatment services amongst the incarcerated population.	assessment and referral services to the N3 population through the colocation of CASC staff at the jail's Community Re-entry and Resource Center (CRRC).											
3. Administrative Oversight	3A. Contract Monitoring  DPH-SAPC staff provides ongoing programmatic, contractual, fiscal, and administrative oversight of Community Assessment Services Center (CASC) and SUD treatment programs.	Maintain compliance with AB109 contract monitoring of SUD treatment programs and CASC (contracted providers).      Ensure dedicated AB109 funding is fully utilized.	\$ 1,005,000		12	\$ 451,620	\$ 139,620	\$ 147,786	\$ 164,215		\$ 287,406	\$ 164,215	9
	3B. Criminogenic Training Pilot  CASC and the treatment provider network have reported particular challenges in motivating AB109 clients to engage in SUD treatment services. Overall, in-network treatment completion is 38%.	1) Assessment and referral process of the AB109 population to treatment; 2) Implementation of process improvement model and training of the AB109 treatment provider network.		\$ 200,000		\$ -	\$ -		\$ -		\$ -	\$ -	



# COUNTY OF LOS ANGELES AB109 PUBLIC SAFETY REALIGNMENT PROGRAM DIRECTORY & PERFORMANCE MEASURES REPORT (as of March 31, 2014)

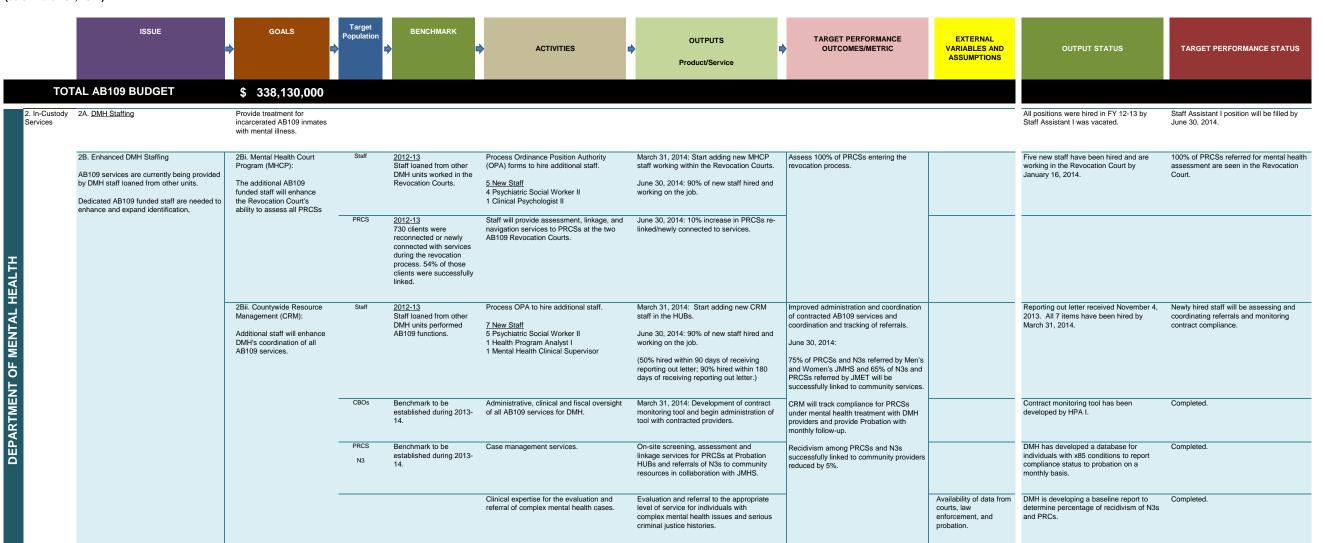


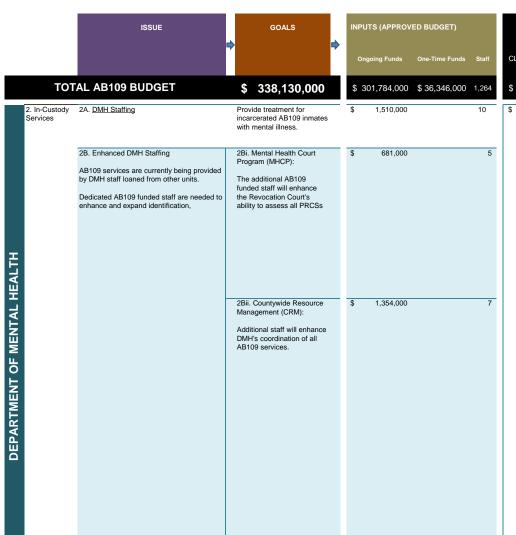
	ISSUE	GOALS	Target Population	BENCHMARK	ACTIVITIES	OUTPUTS Product/Service	TARGET PERFORMANCE OUTCOMES/METRIC	EXTERNAL VARIABLES AND ASSUMPTIONS	OUTPUT STATUS	TARGET PERFORMANCE STATUS
TO	OTAL AB109 BUDGET	\$ 338,130,000								
HEALT		\$ 28,005,000								
1. Communit Based Services	nity 1A. <u>DMH Direct Services</u> CIOB, PG Administration, Directly Operated Clinics and jail costs	Provide mental health treatment in jail and directly operated clinics, augment CIOB and Office of PG Administration staff.	PRCS	2012-13: Hiring for 38 staff completed.	Staff are currently providing mental health services in jails, revocation court, Pre- release Center, and HUBs. OPC staffed to provide conservatorship investigations and appointments.	Continue to provide services.	All positions hired by June 30, 2013.		Mental health treatment on-going; Countywide Resource Management; Jail Mental Health Services, CIOB and PG Administration staff hired. 35 out 38 positions have been hired by staff providing Community based services.	Five positions were originally hired and have been vacated-hiring in process as of March 31, 2014.
	1B. State Hospital	Locked State hospital beds for individuals in need of the most secure and intensive level of mental health services.	PRCS	2012-13: Served five PRCS.	Provide intensive, locked mental health treatment for individuals in need of the highest level of care.	Continue to provide services as clinically indicated.	Continue to provide intensive, locked mental health treatment for individuals in need of the highest level of care.		On-going	Two individuals have been served and transitioned to lower levels of care. Two are currently housed in State hospitals.
	1C. In-patient Contracts	Provide acute inpatient treatment to stabilize individuals in psychiatric crisis in acute FFS and PDP hospitals.	PRCS N3	Benchmark to be established in 2013-14.	Provide acute inpatient services based on clinical need.	Continue to provide services as clinically indicated.	Continue to provide acute inpatient mental health treatment for individuals in need of this level of care.		On-going	Beds are being utilized for individuals needing this level of care.
НЕАСТН	1D. Non-Medi-Cal Contracts	Provide indigent/non-Medi- Cal reimbursable acute inpatient and outpatient services based on clinical need.	PRCS	Benchmark to be established in 2013-14	Provide indigent/non-Medi-Cal reimbursable acute inpatient and outpatient services based on clinical need.	Continue to provide services as clinically indicated for non-Medi-Cal patients.			On-going On-going	Beds are being utilized for individuals needing this level of care.
DEPARTMENT OF MENTAL HEALTH	1E. IMD Contracts	Provide locked long-term mental health residential treatment.	PRCS	Benchmark to be established in 2013-14.	Expand IMD bed resources for forensic populations, including RSOs.	Continue to expand IMD contracts and develop IMD bed resources for PRCS population.	By June 30, 2014: Expand capacity for locked and/or intensive residential services for PRCS population.	A potential in lack of IMD bed resources for forensic population may impact the ability to expand the bed capacity in IMDs or other intensive residential treatment settings.	On-going Control of the control of t	Beds are being utilized for individuals needing this level of care.
DEPARTME	1F. <u>Outpatient Contract Services</u>	General Outpatient Services  Provide outpatient mental health and co-occurring treatment services in the community including individual and group treatment, medication support, crisis intervention, and case management services including crisis services and urgent care centers.	PRCS	Benchmark to be established in 2013-14.	Provide forensic mental health treatment for individuals in need of the various levels of outpatient care.	Continue to provide services as clinically indicated.	Continue to provide outpatient mental health treatment for individuals in need of this level of care.		On-going	Outpatient services are being provided for individuals needing this level of care.
		Crisis Services/Urgent Care Contract  Provide crisis intervention and crisis stabilization services for up to 24 hours for those who would otherwise be taken to emergency rooms.	PRCS	Benchmark to be established in 2013-14.	Provide capacity in Urgent Care Centers for PRCS population.	Continue to provide services as clinically indicated.	Continue to provide crisis stabilization treatment for individuals in need of this level of care.		On-going	Crisis Stabilization units are being utilized for PRCS individuals needing this level of care.

	ISSUE	GOALS	INPUTS	(APPROVE	D BUDGET)		YEAR-TO-DATE CLAIMS & REIMBURSEMENTS  (1Q, 2Q, 3Q reimbursement are cappped. 4Q reimbursement will be to full annual budgeted allocation)												
	1	<b>•</b>		ng Funds	One-Time Funds	Staff	CLA	AIM SUBMITTED	1Q REIMBURSEM	NT R	2Q REIMBURSEMENT	REIM (F	3Q BURSEMENT PENDING)	4Q REIMBURSEMENT	REIM	TOTAL MBURSEMENTS	UNREIMBUF ENDING C		S
тот	TAL AB109 BUDGET	\$ 338,130,000	\$ 301,	784,000	\$ 36,346,000	1,264	\$	233,578,567	\$ 70,759	620 \$	78,198,693	\$	77,129,294	\$ -	\$	148,958,314	\$ 84,62	0,253	1
DEPART HEALTH	MENT OF MENTAL	\$ 28,005,000	\$ 20,	803,000	\$ 7,202,000	80	\$	23,246,395	\$ 5,713	277 \$	8,996,456	\$	8,536,662	\$ -	\$	14,709,733	\$ 8,53	6,662	
1. Community Based Services	DMH Direct Services     CIOB, PG Administration, Directly Operated Clinics and jail costs	Provide mental health treatment in jail and directly operated clinics, augment CIOB and Office of PG Administration staff.	\$ 6	5,117,000		38	\$	4,367,964 \$	1,664	025 \$	1,363,833	\$	1,340,106		\$	3,027,858	\$ 1,3	10,106	
	1B. State Hospital	Locked State hospital beds for individuals in need of the most secure and intensive level of mental health services.	<b>\$</b> 1	1,944,000			\$	162,686 \$	99	199 \$	-	\$	63,487		\$	99,199	\$	63,487	
	1C. In-patient Contracts	Provide acute inpatient treatment to stabilize individuals in psychiatric crisis in acute FFS and PDP hospitals.			1,247,000		\$	2,967,979	810	939 \$	1,316,005	\$	841,035		\$	2,126,944	\$ 8	11,035	
	1D. Non-Medi-Cal Contracts	Provide indigent/non-Medi- Cal reimbursable acute inpatient and outpatient services based on clinical need.	\$ 3	3,764,000															
	1E. IMD Contracts	Provide locked long-term mental health residential treatment.	\$ 1	1,215,000			\$	427,428 \$	85	979 \$	147,676	\$	193,773		\$	233,655	\$ 1	93,773	
	1F. Outpatient Contract Services	General Outpatient Services  Provide outpatient mental health and co-occurring treatment services in the community including individual and group treatment, medication support, crisis intervention, and case management services including crisis services and urgent care centers.	\$ 1	1,484,000	\$ 2,611,000		\$	10,282,035	5 2,288	683 \$	4,477,669	\$	3,515,683		\$	6,766,352	\$ 3,5	15,683	
		Crisis Services/Urgent Care Contract  Provide crisis intervention and crisis stabilization services for up to 24 hours for those who would otherwise be taken to emergency rooms.	\$	433,000	\$ 293,000														

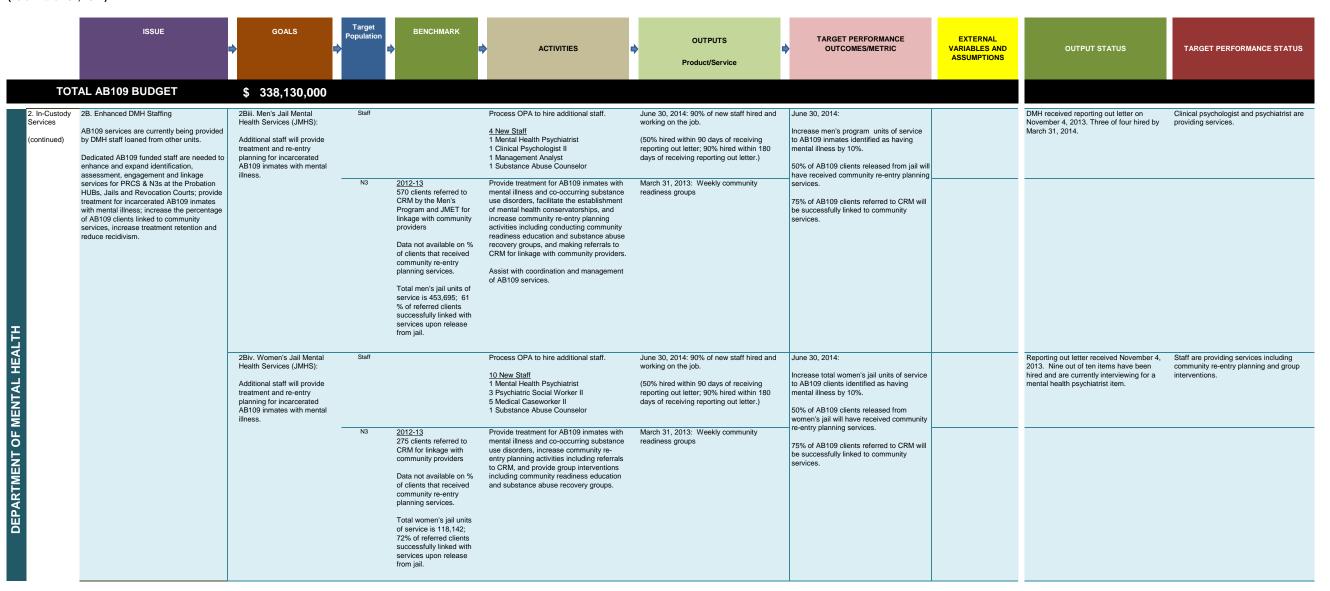
		ISSUE	GOALS	Target Population	BENCHMARK	ACTIVITIES	OUTPUTS Product/Service	TARGET PERFORMANCE OUTCOMES/METRIC	EXTERNAL VARIABLES AND ASSUMPTIONS	OUTPUT STATUS	TARGET PERFORMANCE STATUS
	тот	AL AB109 BUDGET	\$ 338,130,000								
		(continued)	IMD Step-down Contracts  Provide supportive intensive residential programs to serve individuals ready for discharge from higher levels of care including IMDs, acute inpatient units, and jails.	PRCS	Benchmark to be established in 2013-14.	Provide intensive residential mental health treatment for individuals in need of this level of care.	Continue to provide services as clinically indicated.	By June 30, 2014: Utilize 90% of the bed capacity for IMD Step-down providers.	A potential in lack of IMD Step-down bed resources for forensic population may impact the ability to expand the bed capacity for intensive residential treatment settings.		Beds are being utilized for individuals needing this level of care.
ГАL НЕАLТН			IMD Step-down Contract Expansion  Contract for 60 additional beds by March 2014 to provide intensive residential services for individuals ready for discharge from higher levels of care.	PRCS N3	Benchmark to be established in 2013-14.	Amend existing contracts with providers.	By March 2014: Add 60 step-down beds.	The additional specialized treatment beds will improve community retention, access to health care and compliance with treatment; reduce substance related arrests and flash incarcerations; reduce crisis services, emergency room, and acute inpatient services.			The beds have been added and are being fully utilized.
ENT OF MENTAL			Unallocated Services Contract  Provide outpatient mental health and co-occurring treatment services in the community with AB109 providers.	PRCS	N/A	Amend existing contracts with providers.	Expand capacity to provide outpatient mental health and co-occurring treatment.	Expand existing capacity of AB109 providers to provide outpatient treatment in the community.			All amendments in process - under County Counsel review.
1. Comm Based Services (continu	d ces		Stabilization of symptoms through medication intervention.	PRCS	2012-13: Utilized 55% of the PRCS medication budget.	Provide psychotropic medications to all PRCS who meet clinical criteria for medication support.	Continue to provide services as clinically indicated.	Fully utilize PRCS medication budget.		On-going	56% of the contract has been expended.
D	1 C d n	Community based providers are having difficulty engaging and treating clients with mental health and co-occurring disorders who also have criminal justice backgrounds.	Specialized AB109 Training:  Design an AB109-specific training curriculum in concert with the Training Bureau.  Implement training for mental health and co-occurring treatment providers to improve their ability to engage clients in treatment services.	DMH Staff Treatment Providers (mental health and co- occurring)	DMH currently provides no on-going AB109-specific training for providers.	Design a curriculum to enhance knowledge and practices related to engagement and treatment of persons with mental health and co-occurring disorders with criminal justice backgrounds.  Countywide Resource Management will manage this project with the Training Bureau, developing a curriculum that incorporates evidence-based and best-practices concepts.	By December 2013 : Develop the specialized AB109 training curriculum and identification of trainers.  By January 2014: Offer one training session per month to 35-50 DMH and contracted provider staff.	Increasing the knowledge and skill set of evidence-based practices of contracted providers and directly operated staff will improve the treatment of the AB109 population.		were developed in December 2013 in collaboration with DMH training bureau.	January 27, 2014-Assessment and Treatment of AB 109 population; February 27- Co-occurring Disorders Assessment with the Forensic Population; March 27-High Fidelity Cognitive Behavioral Treatment/EBP; April 9 -Seeking Safety (Trauma focused and Substance Abuse Treatment/EBP); May 29-Complex World of Anti-Social Personality Disorders; June 26-Crisis Oriented Recovery Services/EBP Model

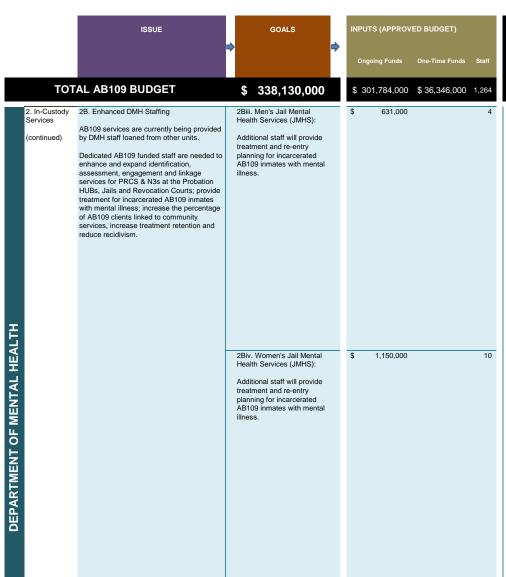
	ISSUE	GOALS	INPUTS (APPRO)	'ED BUDGET)			(1Q,	2Q, 3Q reim	YEAR-T bursement are ca	O-DATE CLAIMS appped. 4Q reimb			al budgete	ed allocation)		
		<b>→</b>	Ongoing Funds	One-Time Funds	Staff	CLAIM SUBMITTED	1Q REIMBURSEM	ENT REI	2Q MBURSEMENT	3Q REIMBURSEM (PENDING		4Q MBURSEMENT		TOTAL URSEMENTS	UNREIMBURSED/F ENDING COSTS	STAI
то	FAL AB109 BUDGET	\$ 338,130,000	\$ 301,784,000	\$ 36,346,000	1,264	\$ 233,578,567	\$ 70,759	,620 \$	78,198,693	\$ 77,129	,294 \$	-	\$ 1	148,958,314	\$ 84,620,253	1,02
	1F. Outpatient Contract Services (continued)  1G. Medications  1H. Training  Community based providers are having difficulty engaging and treating clients with mental health and co-occurring disorders	IMD Step-down Contracts  Provide supportive intensive residential programs to serve individuals ready for discharge from higher levels of care including IMDs, acute inpatient units, and jalls.  IMD Step-down Contract Expansion  Contract for 60 additional beds by March 2014 to provide intensive residential services for individuals ready for discharge from higher levels of care.  Unallocated Services  Contract  Provide outpatient mental health and co-occurring treatment services in the community with AB109 providers.  Stabilization of symptoms through medication intervention.  Specialized AB109 Training:  Design an AB109-specific training curriculum in concert with the Training	\$ 1,679,000	\$ 1,500,000 \$ 1,482,000 \$ 19,000		\$ 1,652,679 \$ -		5,333 \$	557,242		9,104		\$	1,123,575	\$ 529,104	
	who also have criminal justice backgrounds.	Bureau.  Implement training for mental health and co-occurring treatment providers to improve their ability to engage clients in treatment services.														



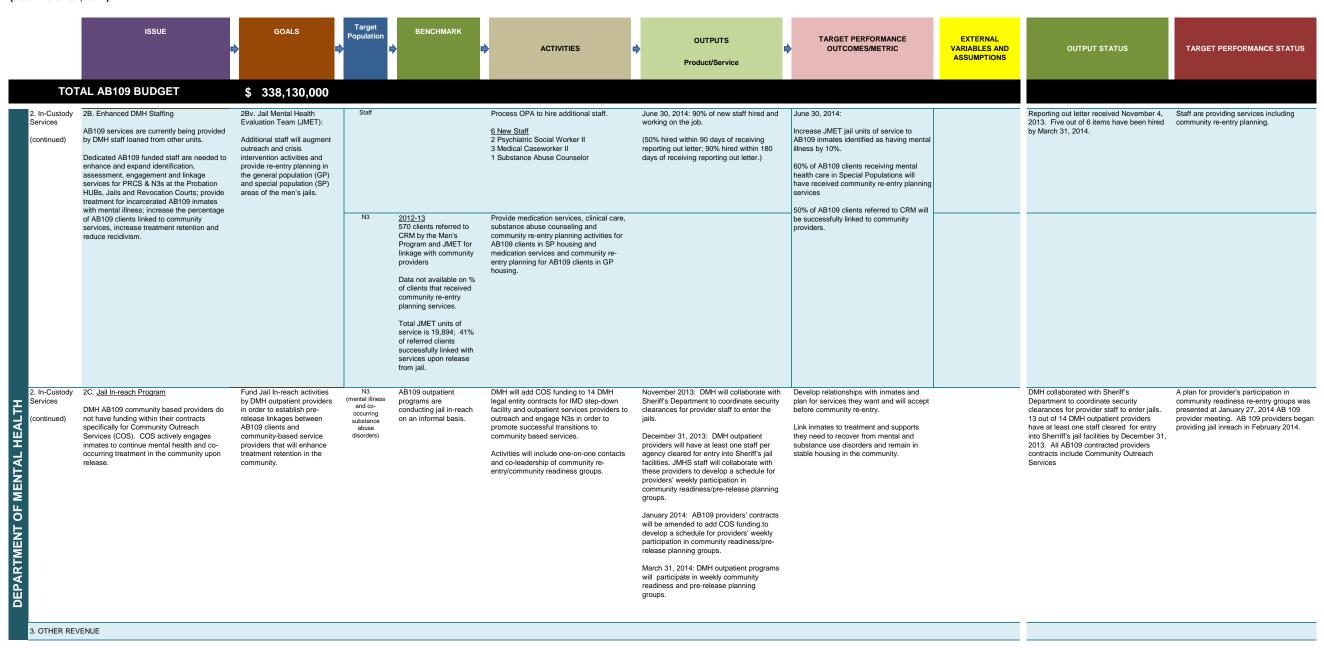


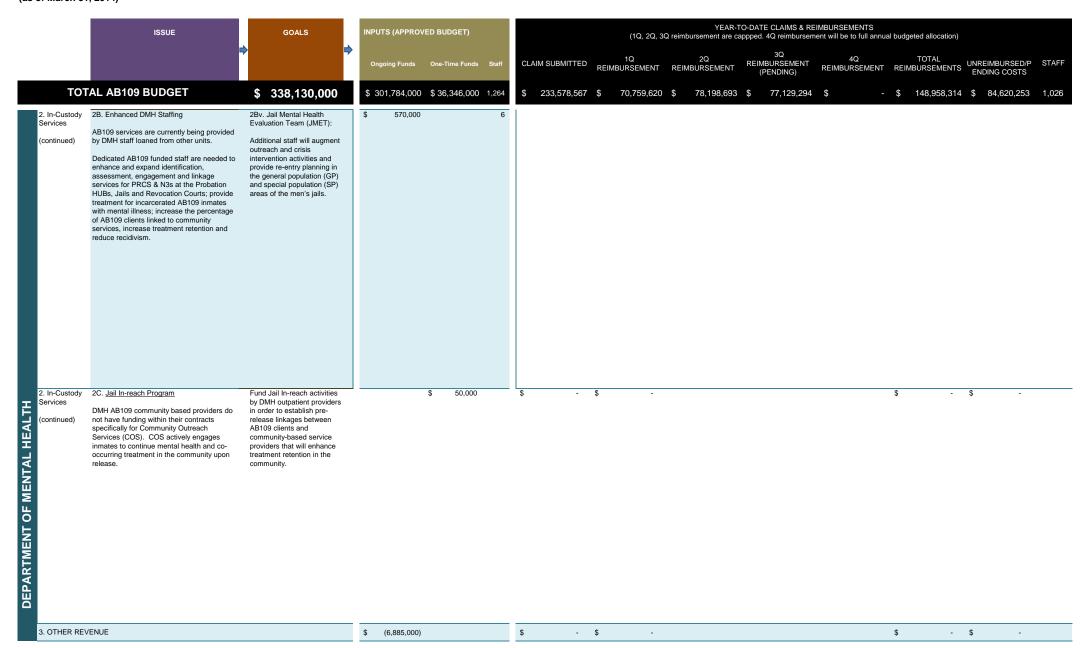
			(1Q, 2Q, 30	Q rein			ATE CLAIMS & RE			al bud	geted allocation)			
CLAIM SUBMITTED		1Q REIMBURSEMENT		2Q REIMBURSEMENT		RE	3Q IMBURSEMENT (PENDING)	4Q REIMBURSEMENT		TOTAL REIMBURSEMENTS			REIMBURSED/P NDING COSTS	STAFF
\$	233,578,567	\$	70,759,620	\$	78,198,693	\$	77,129,294	\$		\$	148,958,314	\$	84,620,253	1,026
\$	3,385,624	\$	198,119	\$	1,134,031	\$	2,053,474			\$	1,332,150	\$	2,053,474	33





		YEAR-IO-DATE CLAIMS & REIMBURSEMENTS  (1Q, 2Q, 3Q reimbursement are cappped. 4Q reimbursement will be to full annual budgeted allocation)												
	CLA	AIM SUBMITTED	UBMITTED 1Q 2Q 2Q REIMBURSEMENT REIMBURSEMEN			RE	3Q IMBURSEMENT (PENDING)	4Q REIMBURSEMENT			TOTAL MBURSEMENTS	REIMBURSED/P NDING COSTS	STAFF	
1	\$	233,578,567	\$	70,759,620	\$	78,198,693	\$	77,129,294	\$		\$	148,958,314	\$ 84,620,253	1,026
ļ														



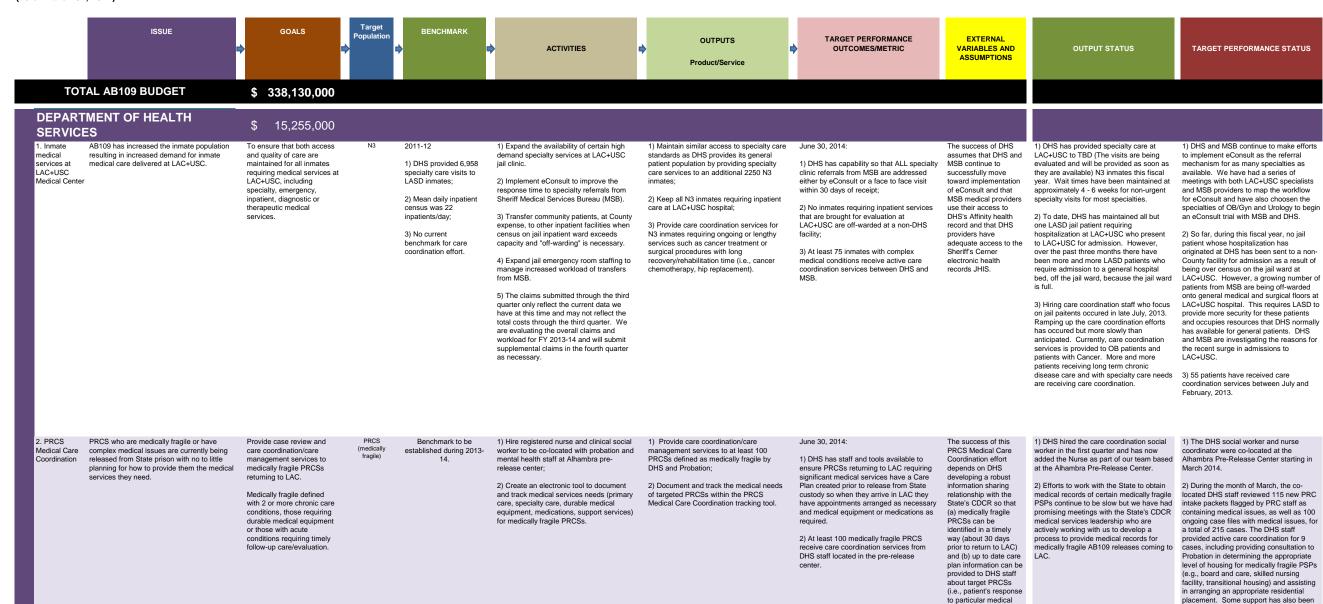


## PERFORMANCE STATUS (as of March 31, 2014)

therapies, status of

wound care, current

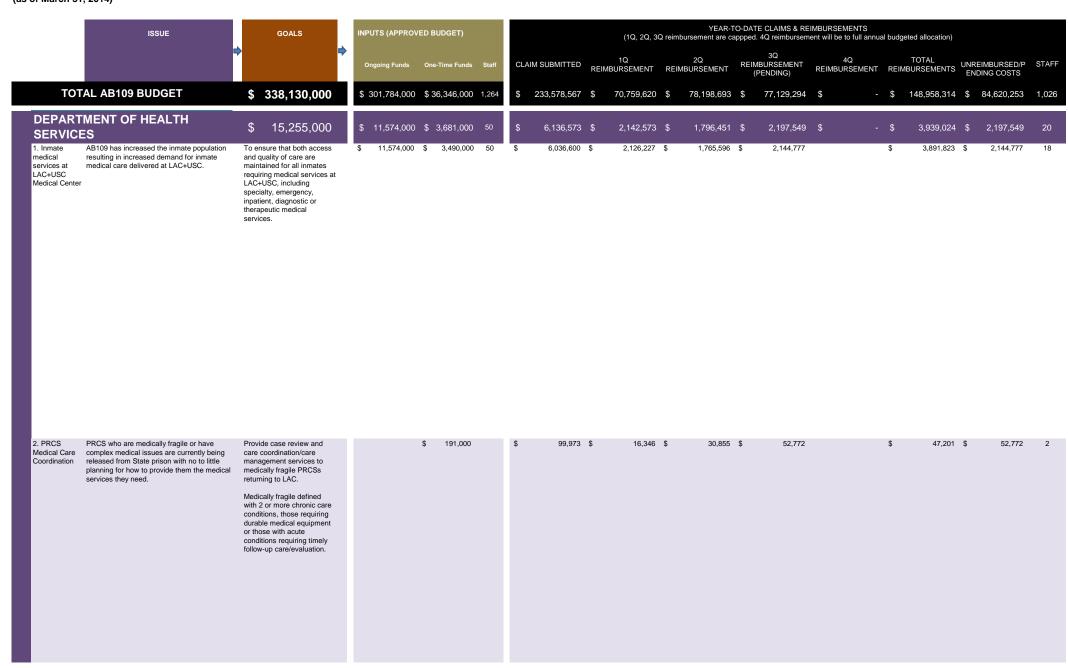
oxygen requirement).

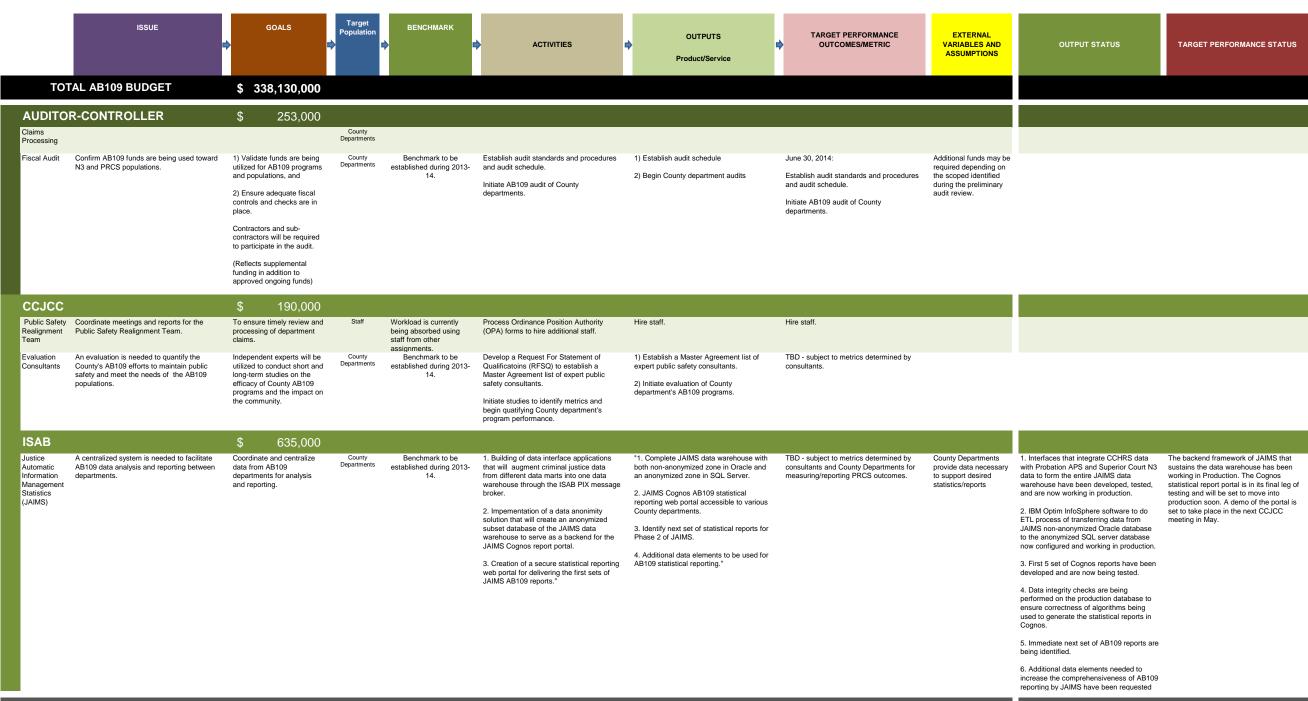


provided in the coordination of follow up

care for chronic and/or acute medical

issues

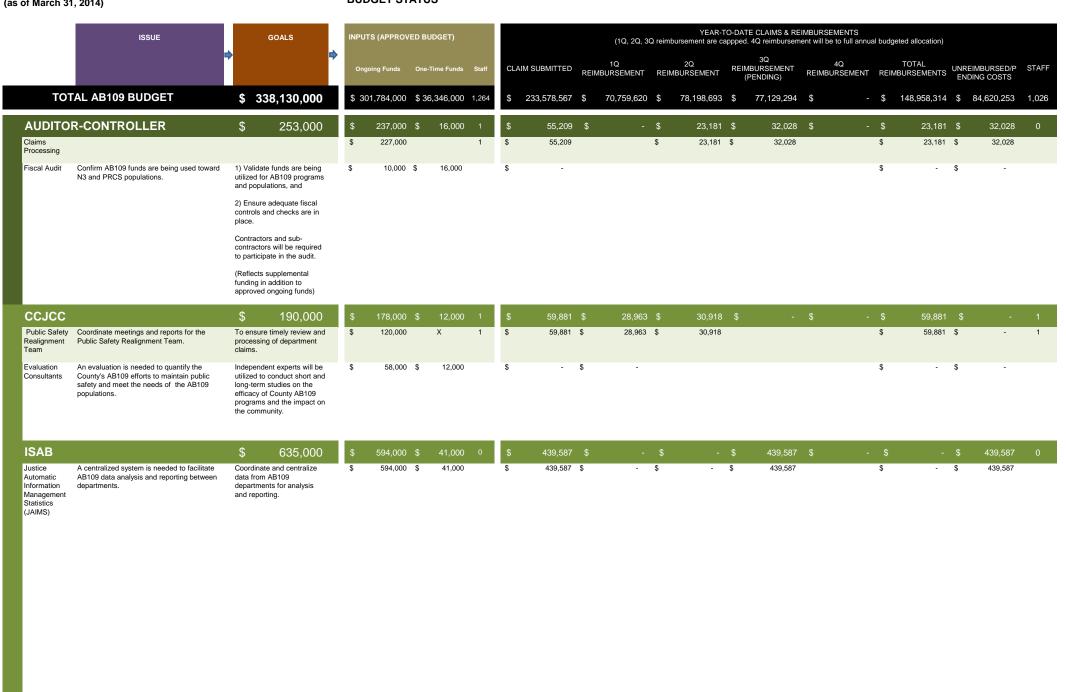




# COUNTY OF LOS ANGELES AB109 PUBLIC SAFETY REALIGNMENT PROGRAM DIRECTORY & PERFORMANCE MEASURES REPORT (as of March 31, 2014)

### **BUDGET STATUS**

\$ 296,764,000 \$ 34,979,000 1,227

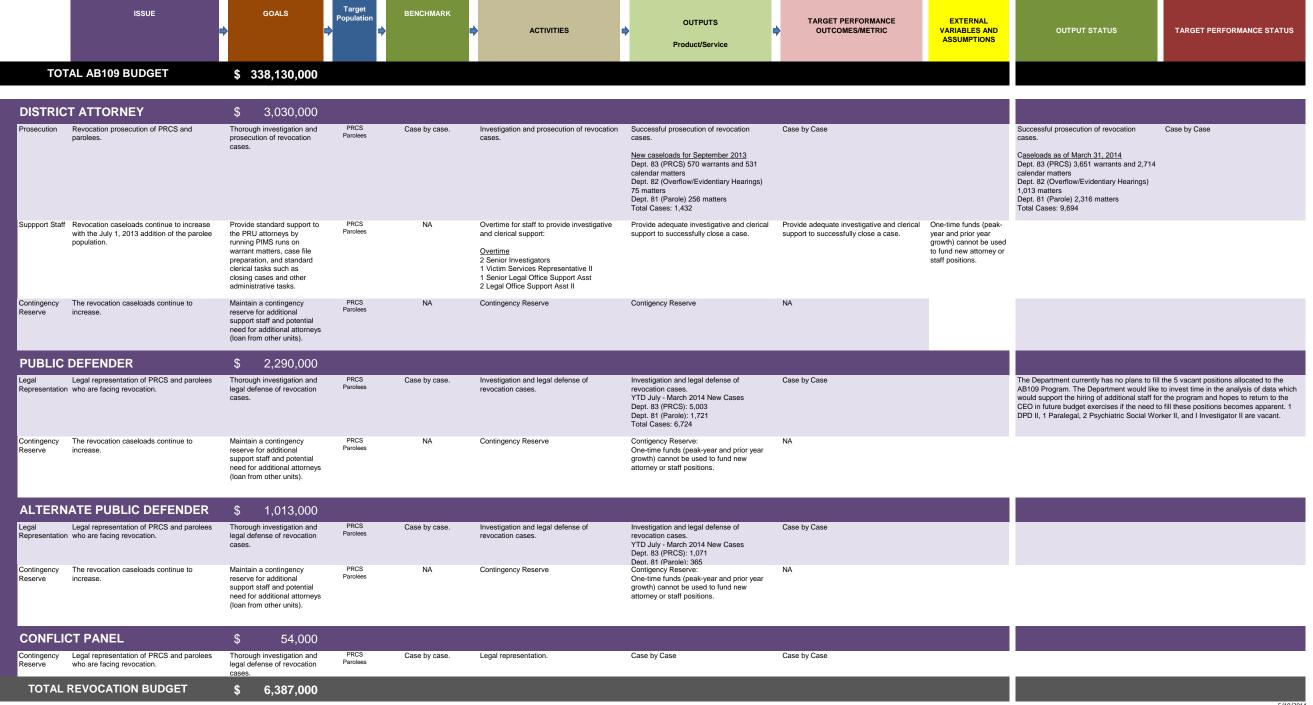


- \$ 146,729,978 \$ 83,277,838 998

TOTAL GENERAL OPERATIONS BUDGET \$ 331,743,000

77,069,112 \$ 75,786,879 \$

\$ 230,007,816 \$ 69,660,865 \$



	DATE OLANGO A REMANDOCATENTO											
	YEAR-TO-DATE CLAIMS & REIMBURSEMENTS  (1Q, 2Q, 3Q reimbursement are cappped. 4Q reimbursement will be to full annual budgeted allocation)											
Ongoing Funds One-Time Funds Staff  CLAIM SUBMITTED REIMBURSEMENT REIMBURSEMENT	3Q 4Q TOTAL UNREIMBURSED/P STAFF (PENDING) REIMBURSEMENT REIMBURSEMENTS ENDING COSTS											
TOTAL AB109 BUDGET \$ 338,130,000 \$ 301,784,000 \$ 36,346,000 1,264 \$ 233,578,567 \$ 70,759,620 \$ 78,198,693	\$ 77,129,294 \$ - \$ 148,958,314 \$ 84,620,253 1,026											
<b>DISTRICT ATTORNEY</b> \$ 3,030,000 \$ 2,359,000 \$ 671,000 18 \$ 1,982,763 \$ 594,797 \$ 610,987 \$	\$ 776,979 \$ - \$ 1,205,784 \$ 776,979 15											
Prosecution Revocation prosecution of PRCS and prosecution of revocation cases.  \$ 2,359,000	\$ 776,979 \$ 1,205,784 \$ 776,979 15											
Suppport Staff Revocation caseloads continue to increase with the July 1, 2013 addition of the parolee population.  Provide standard support to the PRU attorneys by running PIMS runs on warrant matters, case file preparation, and standard clerical tasks such as closing cases and other administrative tasks.	\$ - \$ -											
Contingency The revocation caseloads continue to Maintain a contingency \$ 403,000 \$ - \$ - Reserve increase. reserve for additional support staff and potential need for additional attorneys (loan from other units).	\$ - \$ -											
PUBLIC DEFENDER         \$ 2,290,000         \$ 1,807,000         \$ 483,000         13         \$ 1,221,022         \$ 395,956         \$ 410,592	\$ 414,474 \$ - \$ 806,548 \$ 414,474 8											
Legal Legal representation of PRCS and parolees Thorough investigation and Representation who are facing revocation.  legal defense of revocation cases.  \$ 1,807,000	\$ 414,474 \$ 806,548 \$ 414,474 8											
Contingency The revocation caseloads continue to Reserve increase.  Maintain a contingency \$ 483,000 \$ - \$ - \$ - Reserve for additional support staff and potential need for additional attorneys (loan from other units).	\$ - \$ -											
ALTERNATE PUBLIC DEFENDER \$ 1,013,000 \$ 804,000 \$ 209,000 6 \$ 366,966 \$ 108,002 \$ 108,002 \$	\$ 150,962 \$ - \$ 216,004 \$ 150,962 5											
Legal Legal representation of PRCS and parolees Representation who are facing revocation.  Representation who are facing revocation.  Solution and legal defense of revocation cases.  \$ 804,000 6 \$ 366,966 \$ 108,002 \$	\$ 150,962 \$ 216,004 \$ 150,962 5											
Contingency The revocation caseloads continue to Reserve increase.  Maintain a contingency \$ 209,000 \$ - \$ - Reserve for additional support staff and potential need for additional attorneys (loan from other units).	\$ - \$ -											
CONFLICT PANEL         \$ 54,000         \$ 50,000         \$ 4,000         \$ - \$ - \$         -	\$ - \$ - \$ - 0											
Contingency Legal representation of PRCS and parolees Thorough investigation and \$ 50,000 \$ 4,000 \$ - \$ - \$ - \$ Reserve who are facing revocation.	\$ - \$ - \$ -											
TOTAL REVOCATION BUDGET \$ 6,387,000 \$ 5,020,000 \$ 1,367,000 37 \$ 3,570,751 \$ 1,098,755 \$ 1,129,581 \$	\$ 1,342,415 \$ - \$ 2,228,336 \$ 1,342,415 28											